

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>THH</i>	<i>70591</i>	<i>3/9</i>
O.I.P.E. CLASSIFIER		<i>20</i>	<i>8/16</i>
FORMALITY REVIEW		<i>69055</i>	<i>4-27-00</i>
RESPONSE F RMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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Form PTO-436A  
(Rev. 6/99)

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If more than 150 claims or 10 actions  
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